



John Elias Baldacci
GOVERNOR

STATE OF MAINE
DEPARTMENT OF PROFESSIONAL
AND FINANCIAL REGULATION
BUREAU OF INSURANCE
34 STATE HOUSE STATION
AUGUSTA, MAINE
04333-0034

ALESSANDRO A. IUPPA
SUPERINTENDENT

Name Change Form

Individual or Business Entity (Agency)

Individual

Old Name		Social Security #		License #	
New Name (First, Middle, Last)					
Business Name					
Business Mailing Address				PO Box	
City		State	Zip Code	Phone #	
Home Mailing Address					
City		State	Zip Code	Phone #	

Business Entity (agency)

Note: Typically when a Federal Identification number (FEIN) has changed, a new business entity license is required. If the prior agency is no longer in existence then a letter terminating that entity should be submitted with the new application.

Old Name		FEIN #		License #	
New Name					
Business Mailing Address				PO Box	
City		State	Zip Code	Phone #	

There is a **\$10** fee to have a new license issued in your new name.
Make all checks payable to: **Treasurer State of Maine**



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OFFICES LOCATED AT 124 NORTHERN AVENUE, GARDINER, MAINE 04345

Phone: (207) 624-8475 (Office)

Hearing Impaired 1-888-577-6690

Customer Complaint (800) 300-5000

Fax: (207) 624-8599